## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**CORPORATION** ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 855172

(3)

**DANA-RACINE CORPORATION** 

FILED										
May 01	1997	8:00am								
Secret	ary of	State								

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Principal Place of Business Mailing Address					A LONGIN LAND BYIN BYIN OLD BY AND A	11811 <b>3</b> 1811 <b>3</b> 1811		01 01 1 10 0 t	
4500 DORR STREET TOLEDO OH 43615		P.O. BOX 1000 TOLEDO OH 43697-1000							
-						3. Date Incorporated or Qualified 12/31/1982	3a. Date 05/01		eport
	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				34-4361040		No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional	
27					G. Continuoto er ciatas badinos		Fee Re	equired	
City & State	City & State City & State					6. Election Campaign Financing	r	\$5.00	
23		28				Trust Fund Contribution	.Ц	Added	
Zip	Country	Zip		ountry	1	8. This corporation has liability for i			. 199.032,
24	25	29	30			Florida Statutes  10. Name and Address of New Re	Yes		
	9. Name and Address of Curr	ent Registered Agent		81	Name	10. Name and Address of New Ne	Bistelen WA	Brit	
	CORPORATION SYSTEM			"	INGINIO				
	S. PINE ISLAND ROAD			82	Street	Address (P.O. Box Number is Not Acceptab	le)		
PLA!	NTATION FL 33324			83					
ן י				00					
				84	City		FL	85 Z(p	Code
11 Purcuent	to the provisions of Sactions 607 0	502 and 607 1508 Florida Stat	utes the	alvw	e-namod	corporation submits this statement for the p		anging il	s registered
office or n	egistered agent, or both, in the Sta	to of Florida. Such change was	authori	zed by	the cor	poration's board of directors. I hereby accep	of the appoir	tment as	registered
agent. (a	m familiar with, and accept the ob-	igations of, Section 607.0505, I	iorida S	tatutes	S.				
SIGNATURE	Stgrature, typed or printed name of registered a	agent and ten if applicable (No	D1f Registe	ered Age	nnt signature	required when reinstaling)	DATE		
12.		ND DIRECTORS	18			ADDITIONS/CHANGES TO OFFIC			RS IN 12
TITLE	CD	DELETE	1.1	TITLE		COB, CEO, COO	L.	Change	Addition
NAME	MORCOTT, S. J.		1.2	NAME		002, 020, 000	•	•	
STREET ADDRESS	4515 RIVER ROAD		1.8	STREET	ADDRESS				
CITY-ST-ZIP	TOLEDO, OH 00000		1.4	CITY - S	S1-ZIP				
TITLE	CFO	DELETE	2.1	TITLE		CFO, T	X.	Change	Addition
NAME	AYERS, J. E.		2.5	NAME		Simpson, John S.			
STREET ADDRESS	2391 AYERS RD.		2.5	STREET	ADDRESS	2817 Page Lindsay Lane			
CITY-ST-ZIP	MILLBURY OH		2	4 CHY-	S1 - ZIP	Toledo, OH 43615			
TITLE	VS	☐ DELETE	3.1	THLE			Ľ	Change	Addition
NAME	STROBEL, M. J.		3.5	2 NAME					
STREET ADDRESS	4849 COREY RD		3.5	STREET	ADDRESS		,		
CITY-ST-ZIP	TOLEDO OH		3 0	4. CITY-	ST - ZIP				
TITLE	D	☐ DELETE	4	1 117LE				Change	Addition
NAME	BAILAR, B. F.		4	2 NAME					
STREET ADDRESS	410 EAST WALNUT RD.		4.3	3 STREET	ADDRESS	\	$\wedge$		
CITY-ST-ZIP	LAKE FOREST IL		4,4	4 CITY-S	ST-ZIP		47	_	
TITLE	AT	☐ DEL€1E	5.1	1 TITLE		The state of the s	(>> `□	Change	Addition
NAME	CHARLES W. HINDE		5.3	2 NAME		Y			
STREET ADDRESS	2909 SPRINGWATER DRIVE		5.3	3 \$TREE	ADDRESS	$\sim$	ı		
CITY-ST-ZIP	TOLEDO OH		5.4	4 CITY-5	\$1-2IP				
TITLE	AS	☐ DELETE	6.	1 HILE		20000216 -05/05/97010	:579	Change	Addition
NAME	GRIFFIN, S.A.		6.3	2 NAME		-05/05/97010	40076	ò	
STREET ADDRESS	5664 BERNATH CT		6.	3 STRFE	I ADDRESS	***668.00			
CITY-ST-ZIP	TOLEDO OH		6.	4 CITY- :	ST - ZIP				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.